## Prepaid Health Plans Grievance, Appeal and Fair Hearing Loi BAYOU HEALTH Reporting

Health Plan ID: 2162845

DocumentID: PS113 Revision Date: 3/18/2014

Health Plan Name: Louisiana Healthcare Connections

Document Name: Grievance, Appeal and Fair Hearing Log

Health Plan Contact: \*\*\*

Reporting Frequency: Monthly

Report Period Start Date: 1/1/2014

Report Period End Date: 3/31/2014

Report Period End Date: 3/31/2014

Report Period End Date: 5/31/2014

Report Due Date: 15th of each month

Report Due Date: 4/30/2014

Subject Matter: Member Services
Submission Date of Report:

20 Louisiana Healthcare Connections BAYOU HEALTH Grievances and Appeals Report				
I. Contact Information				
Date:	4/30/2014			
Health Plan Name:	Louisiana Healthcare Connections			
Contact Name:	***			
Contact Title:	Vice President of Compliance			
Address:	8585 Archives Avenue Ste. 310			
	Baton Rouge, LA 70809			
Telephone Number:	***			
E-mail Address:	***			

This report was based on LA Healthcare Connections' understanding of the current report specifications provided by DHH.

The report programming is still under review, thus any changes may result in resubmission of the report.

This report should not be used for comparative purposes until all reporting format and specifications have been finalized.

## **Prepaid Health Plans Grievance, Appeal and Fair Hearing Log**

Health Plan ID: 2162845

**Health Plan Name: Louisiana Healthcare Connections** 

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Report Period Start Date: 1/1/2014 Report Period End Date: 3/31/2014 Report Due Date: 4/30/2014

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Louisiana Healthcare Connections			
BAYOU HEALTH Grievances and Appeals Rep	port		
II. Review Activities			
No. and an after a second and a	Grievances	Appeals	State Fair H
Number of grievances received and reviewed			
Number of grievances resolved			
Number of grievances in pending status			
Average Length of time to complete each grievance			,
Number of Appeals received and revewed		173	
Number of Appeals withdrawn		16 166	
Number of Appeals resolved			
Number of appeals considered invalid Number of Health Plan appeals reveresed in member's favor			
		29	
Number of plan appeals in pending status  Average Length of time to complete each appea		8.61 days	
Number of State Fair Hearing received		8.61 days	
Number of State Fair Hearing received  Number of State Fair Hearing level appeals withdrawn			<b>—</b>
Number of State Fair Hearing level appeals withdrawn  Number of State Fair Hearings considered invalid or dismissed			<del>                                     </del>
Number of State Fair Hearings considered invalid of dismissed Number of State Fair Hearings in pending status.			<del>                                     </del>
Average length of time to complete each State Fair Hearing			<del>                                     </del>
Number of overturned decisions at State Fair Hearing Level			<del>                                     </del>
Number of overturned decisions at State Fair Hearing Level  Number of upheld decisions at State Fair Hearing Level			1
Percentage of appeals overturned at the State Fair Hearing level			<b>-</b>
In health plan level appeals where the decision was reversed in the member's favor, what were the most common reasons?			
Medical necessity met			
Pharmacy Reconsideration			
In State Fair Hearing cases where the decision was overturned in the member's favor, what were the most common reasons?			
N/A			
N/A			
List the top 5 reasons that were most commonly the subject of grievances/appeals:			
1 - Pharmacy			
2 - Accessibility of office			
3 - Clinical Criteria Not Met - Medical Procedure			
4 - Clinical Criteria Not Met - Durable Medical Equipment			
5 - Billing and Financial issues			
Additional Information Required for Annual Report Subm			
	Grievances	Appeals	State Fair H
Number still pending at the end of Contract Year	4		1
Percentage of appeals reversed in Contract Year	<u>:                                    </u>		<u> </u>

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Louisiana Healthcare Connections							
Reason Summary Chart							
Reason Number Code	Reason	Number of Grievances	Number of Appeals	Number of State Fair Hearings			
1	Quality of Care	2	0				
2	Accessibility of office	50	0				
3	Attitude/Service of staff	1	0				
4	Quality of office, building	0	0				
5	Timeliness	0	0				
6	Benefit Limitations/Exclusions	0	0	0			
7	Billing and Financial issues	6	0	0			
8	Clinical Criteria Not Met - Durable Medical Equipment	1	14	0			
9	Clinical Criteria Not Met - Inpatient Admissions	0	0	0			
10	Clinical Criteria Not Met - Medical Procedure	0	35	0			
11	Prior or Post Authorization	0	0	0			
12	Lack of Information from Provider	0	6	0			
13	Level of Care Dispute	0	0	0			
14	Pharmacy	4	118	1			
15	Not a State Plan Services	0	0	1			
16	Other (Must provide description in narrative column of Summary Reports)	1	0	0			
	TOTALS	65	173	2			
DO NOT ADD OR CHANGE REASON CODES							

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